

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>H.A.</i>		<i>06/25/01</i>
O.I.P.E. CLASSIFIER	<i>1/10</i>	<i>13</i>	<i>7/95/07</i>
FORMALITY REVIEW	<i>SL</i>	<i>1081</i>	<i>08/13/01</i>
RESPONSE FORMALITY REVIEW	<i>SL</i>	<i>1091</i>	<i>11-28-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*901*  
*08/13/01*  
*253*  
*11/23/01*